## **BEST AVAILABLE COPY**

PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2001									10075458					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	. EN	Y	OR	OTHER SMALL		
TOTAL CLAIMS			15					RATI		FEE	:	RATE	FEE	]
FOR			NUMBER FILED		NUMBER EXTRA			BASIC I	EE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		. 3			X\$ 9	=		OR	X\$18=	524	
INDEPENDENT CLAIMS			3 minus 3 =		•			X42			OR	X84=		i
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+140=			OR	+280= 3	280.	þ
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	ıL		OR	TOTAL	3020.	σ
12 20 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMA	цı	ENTITY	OR	OTHER SMALL	THAN	
V		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	• 42	Minus	** 6	23	= 19		X\$ 9	=		OR	X\$18=	950	
	Independent	• 7	Minus		<u>3_</u>	= 4		X42	=		OR	X84=	800	ı
Ľ	FIRST PRESE	NTATION OF MI		+140	]		OR	+280≃		1				
Fees Pac ( L+144											OR	TOTAL		1
(Column 1) (Column 2) (Column 3)									EE		10	ADDIT. FEE	1.7	1
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST ABER IOUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	1
WON NO	Total	*	Minus	** .		=		X\$ 9	=		OR	X\$18=		
AME	Independent	•	Minus	###	T CL AIN	1-		X42	=		OR	X84=		
_	I FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	COAIN		1	+140	)=		OR	+280=		
									TAL FEE		OR	ADDIT. FEE		]
		(Column 1)			mn 2)	(Column 3)								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	
1	Total		Minus	**		=		X\$ 9	)=		OR	X\$18=		
RE	Independent	•	Minus	***		=		X42	=		OR	7/24		1
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										1	·	1	1
	If the entry in colu	ımn 1 ja lese than t	he entry in colu	ກກ 2. wri	te "0" in c	olumn 3.		+140			OR	L		4
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR	ADDIT. FE	<u> </u>	4
	The Highest Nur	mber Previously Pa	nid For (Total or	Indepen	dent) is th	e highest numb	er to	ound in th	e st	propriate be	ox in c	olumn 1.		